

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEES DETERMINATION | MW | 20 | 09-24-01 |
| O.I.P.E. CLASSIFIER | | | 9/1/01 |
| FORMALITY REVIEW | MM | 920 | 10-04-01 |
| RESPONSE FORMALITY REVIEW | CC | 1114 | 1-4-02 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 — (Through numeral)... Canceled A Appeal
 - Restricted O Objected

| Claim | Date |
|----------|------|
| Final | |
| Original | |
| 1 ✓ | |
| 2 ✓ | |
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| Claim | Date |
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| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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